

Agency Report of:  
Ceremonial Role Events and Ticket/Pass Distributions

A Public Document

<b>1. Agency Name</b> City of San Jose Division, Department, or Region (if applicable) Environmental Services Department Designated Agency Contact (Name, Title) Kerrie Romanow, Environmental Services Director Area Code/Phone Number (408) 535-8100 E-mail webmaster.manager@sanjoseca.gov		Date Stamp	<b>California Form 802</b> For Official Use Only
		<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: _____ (month, day, year)	

**2. Function or Event Information**

Does the agency have a ticket policy? Yes ☒ No ☐ Face Value of Each Ticket/Pass \$ 23.00  
Event Description: SJSU/Hawaii Homecoming Game Date(s) 10 / 8 / 16  
Provide Title/Explanation  
Ticket(s)/Pass(es) provided by agency? Yes ☒ No ☐ If no: \_\_\_\_\_  
Name of Source  
Was ticket distribution made at the behest of agency official? Yes ☐ No ☒ If yes: \_\_\_\_\_  
Official's Name (Last, First)


**3. Recipients**

• Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization.

<b>A.</b> Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
City of San Jose Environmental Service Dept.	34	Employee Recognition
<b>B.</b> Name of Individual (Last, First)		
See attached list of employees	Number of Ticket(s)/ Passes	Identify one of the following: Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below: Employee Recognition
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below:
<b>C.</b> Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
N/A		

**4. Verification**

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

 MONTEZINO DUCENIA CITY MANAGER 11/10/16  
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: \_\_\_\_\_

CSJ Environmental Services  
Employee Recognition  
Football Game Spartan vs. Hawaii Homecoming Game

Last Name	First Name	Qty of Tickets
Morales	Christina	2
Heresia	Cheyne	2
Gonzales	Michael	2
Burke	Laura	2
Moreno	Renato	2
Leu	Alex	2
Mullenix	Diana	2
Lovewell	Joe	2
Alvarado	Luis	2
Hernandez	Luis	2
Hernandez	Hugo	2
Spencer	Novim	2
Bernade	Sandra	2
Pereira	Raymond	2
Tran	Catherine	2
Chautian	Guman	2
Gille	Rayjinder	2
Ohara	Kia	2